### TOWN OF EMBDEN, MAINE

### PLANNING BOARD PURPOSE

THE PURPOSE OF THIS PLANNING BOARD IS TO GRANT OR DENY AN APPLICATION BASED ON THE INFORMATION PROVIDED. WE ARE NOT SITE PLANNERS, ARCHITECTS OR LANDSCAPERS. ALL DETAILS OF AN APPLICATION SHOULD BE DISCUSSED WITH THE CODE ENFORCEMENT OFFICER PRIOR TO THE PLANNING BOARD MEETING. IF YOUR APPLICATION IS DENIED, THE PLANNING BOARD WILL CITE THE REASON FOR DENIAL AND ADVISE YOU OF YOUR RIGHT TO APPEAL. ANY FURTHER DISCUSSION OF THE APPLICATION WILL BE DONE BETWEEN YOU AND THE CODE ENFORCEMENT OFFICER AT A LATER TIME. IT WILL NOT BE DONE AT THE PLANNING BOARD MEETING.

EMBDEN PLANNING BOARD.

## TOWN OF EMBDEN

#### For Office Use Only

## APPLICATION FOR A PERMIT

Physical Add	ltis:			
Map #	Lot#			
Permit #_			-	
Date:	· Fee:	4		
Property Z	oned as: _			
Site Revie	w CEO:			
% of lot or				
Subdivision			no	
Name of su	ibdivision.			
Entr. Per.#				
Subsurface		<u> </u>		
Internal Per	#			

The undersigned applied for a permit for the following	Date:Fee:		
lies said nermit to be issued on the basis of the thior	Property Zoned as:		
mation contained within this application. The applicant	Site Review CEO:		
hereby certifies that all information and attachments to	% of lot occ by it.:		
this continution are true and correct.	Subdivision   yes   no		
NOTE. Check only those items which apply to your	Name of subdivision		
Analtection Completed application required by CEC	Entr. Per.#		
with manufact attachments shall be reviewed on suc and	Subsurface Per#		
approved by CEO prior to submission to Planning Board.	Internal Per#		
I.Applicant:			
Name:			
Name:			
Town, State and Zip code:			
Telephone:			
2.Owner (Please check if same)	•		
Name:	•		
Address:			
Town, State, Zip code:			
Telephone:			
. Describe location of property including 911 Address:			
Existing use of property: Seasonal Year Round  Residential Undeveloped Land Tree CC			
. Is property part of a subdivision? Yes No Name	c of subdivision		
. Lot Dimensions Total Area:			
. 20, 240, 100, 100, 100, 100, 100, 100, 100, 1	· · · · · · · · · · · · · · · · · · ·		
. Type of Sewage Disposal (existing	proposed		
(Copy of Plumbing Permit) Plumbing Permit#			
(Copy of Plumoing Fermity 1 minoring -			
	3		
Existing Structures - exterior Dimensions (length and width	ries Height		
a) Residence			
Type of foundation: [] full [] concrete slat			
b) Garage by Number of Sto			
Type of foundation: Dfill Concrete stal			
Number of Sir	oriesHeight		
Type of foundation:	b frost wall posts		
A mi . Vomanda)	by		
d) Deck: (Porch, Piazza,)Veranda)	(Describe)		

Foundation: posts frost wall Other (Describe)

Other:

•	10. Requested Permit for DNew construction DRehabilitation DRemoval DEmplacement	e
•	DETAILED DESCRIPTION OF PROJECT (NEW CONSTRUCTION OR ADDITION TO	
	EXISTING STRUCTURES)  a) Residence: by Stories Height:	1.0
	Foundation Full Concrete slab   Frost Wall   Posts	
		ų)
	b) Garage: by Stories Height	
	Foundation ☐ Full ☐ Concrete Slab ☐ Frost Wall ☐ Posts	:
	c) Accessory Building: by Stories Height	
	Foundation: DFull Concrete Slab D Frost Wall DPosts	*
	d) Dock: (Parch, Piazza, Veranda) hy	·.
	d) Deck: (Porch, Piazza, Veranda) by Foundation: Posts Frost Wall Other	12 <sub>1.0</sub>
		•
	11. Shore Land zoning: 🗆 Yes 🗆 No	
	Is Property within 75' of river or stream:   Yes  No	
	13 13 William 73 Of fiver of success. 12 163 12/10	
•	Is Property within 250° of lake or pond 🗆 Yes 🗆 No	
	Is Property in the Flood Zone Tyes TNo	
20		5
•	Distance from normal HWM: Residence Garage Other	
	12 Attachments/Charletine months & Committee of the commi	
	<ul> <li>12. Attachments/Checklist required for review of application:</li> <li>a) If property owned less than one year please attach a copy of the deed with the recording</li> </ul>	
	data.	
	b) Compactive at a management of the compactive	*
<b>∴</b>	b) Copy of Plumbing Permit: Indoor Septic system Date:	
	c) Attach photographs of existing site conditions	
		•
	d) Soil crosion control plan.	• •
	e) Attach a copy of official decisions of other Federal, State or local agencies regarding the use of	his property (Site
	location permit, minimum lot size waiver, subdivision approval great ponds permit, etc.)	property. (o
		100
	f) On a separate sheet attach any supplemental information, or explain any points you feel need cla	nfication,
	g) Town of Embden permit fee: \$	•
	h) Five Copies of application presented for review to CEO.	
	I have carefully read this application and the same is true and correct to the best of my ka	awledge and
	belief. In doing this work, all ordinances and codes of the Town of Embden and the laws of	the State of
	Maine will be compiled with, whether specified or not. I will notify the Code Enforcement	Officer, when I
	am ready for the site visits and inspections. No work will be concealed until approved, Co	nsent is given
	for the entry of authorized inspections until the job has received a final inspection for Occ	правсу.
	SIGNATURE: DATE:	

## (For Official Use Only) To be maintained as a permanent record: Date Received: Fee Paid: Date of Action on Application: Approved Denied If application denied, reason for denial: If approved, the following conditions and safeguards were prescribed: \_ Planning board (signatures) (For Use By CEO) Lot size in Sq. Ft. Number of buildings on Lot: 2. Sq. footage and Volume of Existing buildings: 3. Sq. footage and Volume of Proposed Buildings and/or Additions Percentage of Lot coverage (buildings, etc.) Distance from HWM of all Structures. 6.

Percentage of Expansion of Structure:

Flood Zone Elevation Information:

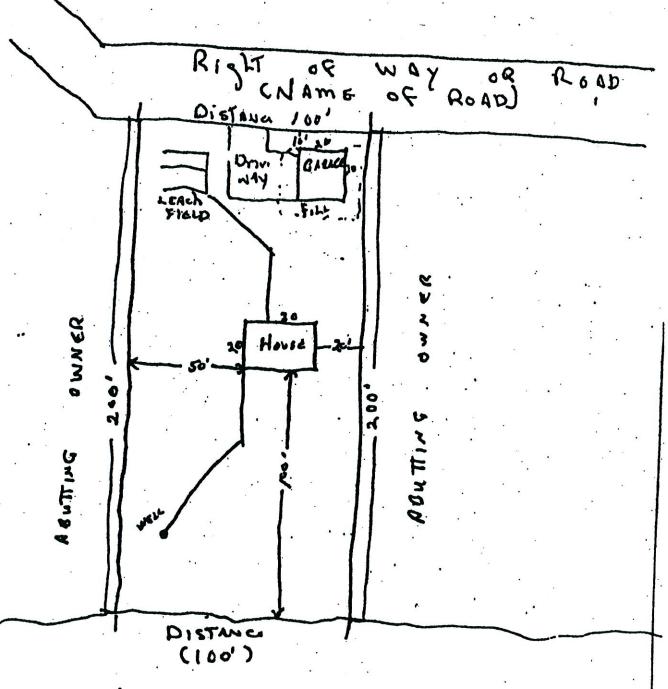
Height of Existing Dwelling;

7.

8.

9.

# EXAMPLE SCALE: 1 Square = 10 Fe

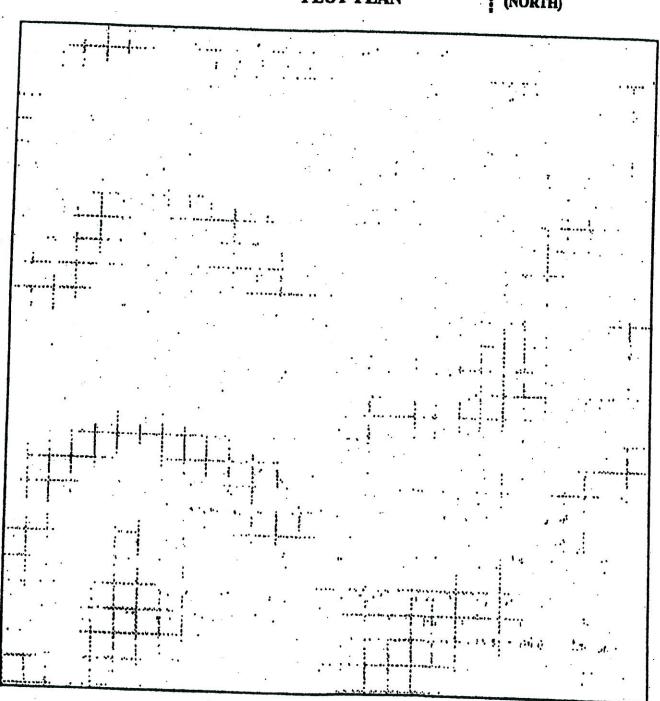


LAKE FRONT (NAME OF LAKE)

PLEASE INCLUDE: LOT LINES: AREA TO BE CLEARED OF TREES AND OTHER VEGETATION; IE: THE EXACT POSITION OF PROPOSED STRUCTURES, INCLUDING DECKS, PORCHES AND ALL OUT BUILDINGS WITH ACCURATE SETBACK DISTANCES FROM SHORELINE, SIDE AND REAR PROPERTY LINES; THE LOCATION OF PROPOSED WELLS, SEPTIC SYSTEMS AND DRIVEWAYS; ALL AREAS AND AMOUNTS TO BE FILLED OR GRADED. IF THE PROPOSAL IS FOR AN EXPAN-SION OF AN EXISTING STRUCTURE, PLEASE DISTINGUISH BETWEEN THE EXISTING STRUC-TURE AND THE PROPOSED EXPANSION.

PLOT PLAN

(NORTH)



Note: This checklist is intended to assist the CEO in tracking a Shoreland Zoning Permit through the review process.

	Shoreland Zoning Permit Checklist	
CH	CKOFF FOR ALL STRUCTURES:	
CHECK	a. [] Complete Shoreland Zoning Permit Application b. [] Pay Appropriate Fee c. [] Lot Area d. [] % of Lot covered by Non-Vegetated Surfaces. e. [] Height of Structure f. [] Setback from High Water Mark g. [] Setback from Side and Rear Lot Lines h. []% of Increase of Expansions of Portion of Structure which is less than required setback. i. [] Copy of Interior and Exterior Plumbing Permits. j. [] Copy of Deed. (recording date on deed) k. [] Elevation of Lowest Floor to 100 year Flood Elevation l. [] Copy of Additional Permit (s) as required.  OFF FOR FURTHER REVIEW:	
e e	m. [Copy of file to Board of Appeals if Variance or special Exception is  Required.  n. [Copy of file to Planning Board if Planning Board Review is Required.	
LIECK	OFF FOR SITE VISITS BY CEO:	
8.6	o. []Preliminary Site visit. Date:	
•1	p. [Prior to Clearing and Excavation Date:	
	q. [] Stake Position Check Date:	
	r.   Footing Check   Date:	